

B1 (Official Form 1) (04/13)

United States Bankruptcy Court SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Paxton, Kenneth		Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): aka Kenneth Edwin Paxton		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): xxx-xx-6832		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State): 10380 Longmont Dr. Houston, TX		Street Address of Joint Debtor (No. and Street, City, and State):
ZIP CODE 77042		ZIP CODE
County of Residence or of the Principal Place of Business: Harris		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):
ZIP CODE		ZIP CODE
Location of Principal Assets of Business Debtor (if different from street address above):		
ZIP CODE		
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under title 26 of the United States Code (the Internal Revenue Code).	Nature of Debts (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box.) <input checked="" type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Check one box: Chapter 11 Debtors <input type="checkbox"/> Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000		
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): Kenneth Paxton	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)			
Location Where Filed: Southern District of Texas - Houston Division	Case Number: 11-32451	Date Filed: 3/24/2011	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet.)			
Name of Debtor: None	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b). <div style="display: flex; justify-content: space-between;"> X /s/ Patrick J. Gilpin, Jr. 6/18/2015 </div> <div style="display: flex; justify-content: space-between;"> Patrick J. Gilpin, Jr. Date </div>	
Exhibit C			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
Exhibit D			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D, completed and signed by the debtor, is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D, also completed and signed by the joint debtor, is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box.)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) <div style="text-align: right; margin-right: 100px;"> _____ (Name of landlord that obtained judgment) </div> <div style="text-align: right; margin-right: 100px; margin-top: 20px;"> _____ (Address of landlord) </div> <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition*(This page must be completed and filed in every case)*Name of Debtor(s): **Kenneth Paxton****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Kenneth Paxton
Kenneth Paxton

X _____

 Telephone Number (If not represented by attorney)

6/18/2015

 Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____
 (Signature of Foreign Representative)

 (Printed Name of Foreign Representative)

 Date

Signature of Attorney*

X /s/ Patrick J. Gilpin, Jr.
Patrick J. Gilpin, Jr. Bar No. **24044739**

Baker & Associates
5151 Katy Freeway
Suite 200
Houston, TX 77007-2251

Phone No. **(713) 869-9200** Fax No. **(713) 869-9100**

6/18/2015

 Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____
 Signature of Authorized Individual

 Printed Name of Authorized Individual

 Title of Authorized Individual

 Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

 Printed Name and title, if any, of Bankruptcy Petition Preparer

 Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

 Address

X _____

 Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

B 1D (Official Form 1, Exhibit D) (12/09)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re: **Kenneth Paxton**

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- ☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
- ☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D (Official Form 1, Exhibit D) (12/09)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re: **Kenneth Paxton**

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Continuation Sheet No. 1

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Kenneth Paxton
Kenneth Paxton

Date: 6/18/2015

B6A (Official Form 6A) (12/07)

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE A - REAL PROPERTY**

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
<p>Inherited Property/Homestead Property Address: 10380 Longmont Drive Houston, Texas 77042</p> <p>Legal Description: Unit 5 Block 51 Town & Country T/H Section 5 R/P</p>	Fee Simple	-	\$140,660.00	\$92,276.59

Total: \$140,660.00

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.		Cash on Hand	-	\$0.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home-stead associations, or credit unions, brokerage houses, or cooperatives.		Bank of America Checking Account xxxx5144 \$1,360.00	-	\$1,360.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video and computer equipment.		Stove \$75.00 Refrigerator/Freezer \$175.00 Dishwasher \$25.00 Washing Machine \$50.00 Dryer \$50.00 Living Room Furniture \$450.00 Silverware \$25.00 Bedroom Furniture \$200.00 Lawn Furniture \$65.00 Televisions \$20.00 Household Tools \$100.00 Plates, China, etc. \$65.00 Dining Room Furniture \$75.00	-	\$1,375.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		Pictures \$135.00 Coin Collection \$100.00	-	\$235.00
6. Wearing apparel.		Clothing and Shoes	-	\$75.00
7. Furs and jewelry.		Watches and Jewelry	-	\$65.00

B6B (Official Form 6B) (12/07) -- Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Continuation Sheet No. 1

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Term Life Insurance Policy through Employer Death Benefit \$25,000.00 (Debtor)	-	\$0.00
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		IRA through Frost Bank	-	\$0.03
		John Hancock Pension Monthly Payment \$41.33	-	\$41.33
		Chevron Retirement Plan Monthly Payment \$811.98	-	\$811.98
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			

B6B (Official Form 6B) (12/07) -- Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 2*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			

B6B (Official Form 6B) (12/07) -- Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 3*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2012 Toyota Corolla L 42,000 Miles (Debtor)	-	\$10,150.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			

B6B (Official Form 6B) (12/07) -- Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 4*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
<div style="text-align: right;"> 4 continuation sheets attached (Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.) </div>				Total > \$14,113.34

B6C (Official Form 6C) (4/13)

In re **Kenneth Paxton**Case No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

- ☐ 11 U.S.C. § 522(b)(2)
☒ 11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds
 \$155,675.*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Inherited Property/Homestead Property Address: 10380 Longmont Drive Houston, Texas 77042 Legal Description: Unit 5 Block 51 Town & Country T/H Section 5 R/P	Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-.002	\$48,383.41	\$140,660.00
Stove \$75.00 Refrigerator/Freezer \$175.00 Dishwasher \$25.00 Washing Machine \$50.00 Dryer \$50.00 Living Room Furniture \$450.00 Silverware \$25.00 Bedroom Furniture \$200.00 Lawn Furniture \$65.00 Televisions \$20.00 Household Tools \$100.00 Plates, China, etc. \$65.00 Dining Room Furniture \$75.00	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	\$1,375.00	\$1,375.00
Pictures \$135.00 Coin Collection \$100.00	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(1)	\$235.00	\$235.00
Clothing and Shoes	Tex. Prop. Code §§ 42.001(a), 42.002 (a)(5)	\$75.00	\$75.00
* Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.		\$50,068.41	\$142,345.00

B6C (Official Form 6C) (4/13) -- Cont.

In re **Kenneth Paxton**Case No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT***Continuation Sheet No. 1*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Watches and Jewelry	Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)	\$65.00	\$65.00
Term Life Insurance Policy through Employer Death Benefit \$25,000.00 (Debtor)	Tex. Ins. Code § 1108.051	\$0.00	\$0.00
IRA through Frost Bank	Tex. Prop. Code § 42.0021	\$0.03	\$0.03
John Hancock Pension Monthly Payment \$41.33	Tex. Prop. Code § 42.0021	\$41.33	\$41.33
Chevron Retirement Plan Monthly Payment \$811.98	Tex. Prop. Code § 42.0021	\$811.98	\$811.98
2012 Toyota Corolla L 42,000 Miles (Debtor)	Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)	\$0.00	\$10,150.00
		\$50,986.75	\$153,413.34

B6D (Official Form 6D) (12/07)

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #: xxxxxxxxx8004 Creative Management 8323 Southwest Freeway Suite 330 Houston, TX 77074	-	DATE INCURRED: NATURE OF LIEN: HOA Fees COLLATERAL: Homestead REMARKS: VALUE: \$140,660.00				\$17,340.00	
ACCT #: xxxxxx3037 Gm Financial Po Box 181145 Arlington, TX 76096	-	DATE INCURRED: 05/2012 NATURE OF LIEN: Purchase Money COLLATERAL: 2012 Toyota Corolla L REMARKS: VALUE: \$10,150.00				\$17,248.00	\$7,098.00
ACCT #: Propel Financial Services, LLC P.O. Box 844319 Dallas, TX 75284	-	DATE INCURRED: NATURE OF LIEN: Property Taxes COLLATERAL: Homestead REMARKS: VALUE: \$140,660.00				\$6,671.58	
ACCT #: xxxxxxxxx5001 Wells Fargo P.O. Box 5169 Sioux Falls, SD 57117	-	DATE INCURRED: NATURE OF LIEN: Mortgage COLLATERAL: Homestead REMARKS: VALUE: \$140,660.00				\$65,884.25	
Subtotal (Total of this Page) >						\$107,143.83	\$7,098.00
Total (Use only on last page) >							

1 continuation sheets attached

(Report also on
Summary of
Schedules.)(If applicable,
report also on
Statistical
Summary of
Certain Liabilities
and Related
Data.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6E (Official Form 6E) (04/13)

In re **Kenneth Paxton**

Case No. _____

(If Known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

☒ **Administrative allowances under 11 U.S.C. Sec. 330**

Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (04/13) - Cont.

In re **Kenneth Paxton**Case No. _____
(If Known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

TYPE OF PRIORITY	Taxes and Certain Other Debts Owed to Governmental Units
------------------	--

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #: Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only	Notice Only	Notice Only
ACCT #: Internal Revenue Service-2011-2014 Taxes Insolvency Section 1919 Smith St Stop 5022 HOU Houston, TX 77002	-	DATE INCURRED: 2011-2014 CONSIDERATION: 1040 Taxes REMARKS:		\$8,654.86	\$8,654.86	\$0.00
Sheet no. <u>1</u> of <u>2</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims				Subtotals (Totals of this page) >	\$8,654.86	\$8,654.86
Total >						
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)						
Totals >						
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)						

B6E (Official Form 6E) (04/13) - Cont.

In re **Kenneth Paxton**Case No. _____
(If Known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

TYPE OF PRIORITY	Administrative allowances
------------------	---------------------------

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #: Baker & Associates 5151 Katy Freeway, Suite 200 Houston, TX 77007	-	DATE INCURRED: CONSIDERATION: Attorney Fees REMARKS:		\$3,825.00	\$3,825.00	\$0.00
ACCT #: Baker & Associates - EFT Order 5151 Katy Freeway, Suite 200 Houston, TX 77007	-	DATE INCURRED: CONSIDERATION: Attorney Fees REMARKS:		\$100.00	\$100.00	\$0.00
Sheet no. <u>2</u> of <u>2</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims				Subtotals (Totals of this page) >	\$3,925.00	\$3,925.00
Total > (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)				\$12,579.86		
Totals > (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)					\$12,579.86	\$0.00

B6F (Official Form 6F) (12/07)

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: A Parhizqar 2323 South Voss Rd Houston, Tx 713-589-2732	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxx8003 Ace Cash Express 1231 Green Way Drive Irving, TX 75038	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: ACS P. O. Box 730 Aberdeen, SD 57402	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxx8321 Acs/gco Ed Loan Fund 501 Bleecker St Utica, NY 13501	-	DATE INCURRED: 12/1995 CONSIDERATION: Educational REMARKS:				\$1,770.00
ACCT #: xxxxxx8321 Acs/gco Ed Loan Fund C/o Acs Utica, NY 13501	-	DATE INCURRED: 12/1995 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxx0778 Allied Cash Advance 7613 Westheimer Rd Houston, Texas 77063	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Subtotal >						\$1,770.00
Total >						

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxxxxx0273 American Express c/o Becket and Lee LLP PO Box 3001 Malvern, PA 19355	-	DATE INCURRED: 10/21/1994 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx0273 American Express PO Box 3001 16 General Warren Blvd Malvern, PA 19355	-	DATE INCURRED: 10/21/1994 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxx0558 American Honda Finance 3625 W Royal Lane Irving, TX 75063	-	DATE INCURRED: 10/2007 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxx6999 American Honda Finance 3625 W Royal Lane Irving, TX 75063	-	DATE INCURRED: 06/2005 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxx0558 American Honda Finance 3625 W Royal Ln Ste 100 Irving, TX 75063	-	DATE INCURRED: 10/2007 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxx0882 Americredit Po Box 181145 Arlington, TX 76096	-	DATE INCURRED: 03/2002 CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>1</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$0.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxxxxxxx3453 Amex c/o Beckett & Lee PO Box 3001 Malvern, PA 19355	-	DATE INCURRED: 11/1984 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxxxx9073 Amex c/o Beckett & Lee PO Box 3001 Malvern, PA 19355	-	DATE INCURRED: 02/1984 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxxxx4355 Applied Card Bank Attention: General Inquiries PO Box 17125 Wilmington, DE 19850	-	DATE INCURRED: 02/14/2006 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxxxx4355 Applied Card Bank Attention: Bankruptcy PO Box 17125 Wilmington, DE 19850	-	DATE INCURRED: 02/14/2006 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxx2187 At & T U Verse P O BOX 5014 Carol Stream, IL 60197-5014	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xx5522 Atlas Credit 119 E. 5th Street Austin, TX 78701	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>2</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$0.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxx6785 B&f Finance 7012 Woodridge Houston, TX 77087	-	DATE INCURRED: 02/09/2010 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxx6183 B&f Finance 7012 Woodridge Houston, TX 77087	-	DATE INCURRED: 11/10/2009 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxx5301 B&f Finance 7012 Woodridge Houston, TX 77087	-	DATE INCURRED: 07/06/2009 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxx6785 B&f Finance B&F Finance PO Box 850, Attn: Bankruptcy Lake Dallas, TX 75065	-	DATE INCURRED: 02/09/2010 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxx6183 B&f Finance B&F Finance PO Box 850, Attn: Bankruptcy Lake Dallas, TX 75065	-	DATE INCURRED: 11/10/2009 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Bayou City EMS Group PO Box 451960 Houston, TX 77245	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Subtotal >						\$0.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

Sheet no. 3 of 23 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: Bayou City EMS Group Medical 7979 Alameda Rd. Houston, Tx 77054	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxx44-05 Bright Star Cash P.O. Box 502 Lac du Flambeau, WI 54538	-	DATE INCURRED: CONSIDERATION: Payday Loan REMARKS:			X	\$120.00
ACCT #: xxxxxx73-05 Bright Star Cash P.O. Box 502 Lac du Flambeau, WI 54538	-	DATE INCURRED: CONSIDERATION: Payday Loan REMARKS:			X	\$660.00
ACCT #: xxxxxxx99-22 Bright Star Cash P.O. Box 502 Lac du Flambeau, WI 54538	-	DATE INCURRED: CONSIDERATION: Payday Loan REMARKS:			X	\$186.00
ACCT #: xxxxxxxxxxx5293 Cap One Po Box 5253 Carol Stream, IL 60197	-	DATE INCURRED: 09/2004 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxx4316 Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130	-	DATE INCURRED: 08/05/2005 CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>4</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal >
						\$966.00
						Total >
						(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxxxxx5892 Capital One, N.a. Bankruptcy Dept PO Box 5155 Norcross, GA 30091	-	DATE INCURRED: 08/1999 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx4316 Capital One, N.a. Bankruptcy Dept PO Box 5155 Norcross, GA 30091	-	DATE INCURRED: 08/2005 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Cardiovascular Care PO Box 1599 Houston, Tx 77251	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Carson Lo PO Box 19814 Houston, Tx 77224	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxx9435 Cash Central 84 E. 2400 N. North Logan, UT 84341	-	DATE INCURRED: 4/2015 CONSIDERATION: Payday Loan REMARKS:			X	\$600.00
ACCT #: xxxxxxxx7161 Cash Store 12350 Westheimer Suite B Houston, Texas 77077	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>5</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$600.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxx8007 CashNet USA 175 W. Jackson Blvd. Suite #1000 Chicago, IL 60604	-	DATE INCURRED: 4/2015 CONSIDERATION: Unsecured Debt REMARKS:			X	\$690.00
ACCT #: xxxxx4880 Cbna Po Box 6189 Sioux Falls, SD 57117	-	DATE INCURRED: 06/1978 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx4042 Chase Attn: Bankruptcy Dept PO Box 15298 Wilmington, DE 19850	-	DATE INCURRED: 08/1998 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx0380 Chase P.o. Box 15298 Wilmington, DE 19850	-	DATE INCURRED: 09/2007 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx2115 Chase P.o. Box 15298 Wilmington, DE 19850	-	DATE INCURRED: 07/2005 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx9908 Chase P.o. Box 15298 Wilmington, DE 19850	-	DATE INCURRED: 12/2002 CONSIDERATION: Notice Only REMARKS:				Notice Only
Subtotal >						\$690.00
Total >						

Sheet no. 6 of 23 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxxxxx2833 Chase P.o. Box 15298 Wilmington, DE 19850	-	DATE INCURRED: 07/2004 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx0380 Chase Card Po Box 15298 Wilmington, DE 19850	-	DATE INCURRED: 09/2007 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxx0300 Chase Manhattan Bank Po Box 2558 Houston, TX 77252	-	DATE INCURRED: 11/1998 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Check N Go 7755 Montgomery Road, Suite 400 Cincinnati, OH 45236	-	DATE INCURRED: CONSIDERATION: Payday Loan REMARKS:			X	\$877.00
ACCT #: xxxxxx2878 Chevron / Texaco Citibank Attn: Centralized Bankruptcy PO Box 20507 Kansas City, MO 64195	-	DATE INCURRED: 07/01/2000 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Comcast P.O. Box 660618 Dallas, Texas 75266-0618	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>7</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$877.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: 2817 Courtesy Credit Co 7006 Woodridge Houston, Texas 77087	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Credit One Bank P.O. Box 60508 City of Industry, CA 91716-0500	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Credit Services Organization 201 Keith Street, Suite 80 Cleveland, TN 37311	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxxxxxxxx86-11 Dell Financial Services Attn: Bankruptcy Dept. PO Box 81577 Austin, TX 78708	-	DATE INCURRED: 11/2005 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxxxxxxxx8486 Dell Financial Services Dell Financial Services Attn: Bankruptcy PO Box 81577 Austin, TX 78708	-	DATE INCURRED: 11/21/2005 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxx7944 Delta Fin/ryl Mgt 25331 1h 10 West San Antonio, TX 78257	-	DATE INCURRED: 01/2011 CONSIDERATION: Collection REMARKS:			X	\$1,322.00
Sheet no. 8 of 23 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal >
						\$1,322.00
						Total >
						(Use only on last page of the completed Schedule F.)
						(Report also on Summary of Schedules and, if applicable, on the
						Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxx944-1 Deltafin 25331 1h 10 West San Antonio, TX 78257	-	DATE INCURRED: 05/20/2010 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxx-xxxx-xxxx-7252 Denovus 480 Johnson Road, Suite 110 Washington, PA 15301	-	DATE INCURRED: CONSIDERATION: Credit Card REMARKS:			X	\$374.00
ACCT #: xxxxxxxxxxxx0000 DSRM National Bank/Diamond Shamrock PO Box 300 Amarillo, TX 79105	-	DATE INCURRED: 04/27/2000 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Eseroghene Otah 17510 West Grand Parkway South, Ste. 590 Sugarland, Tx 77479	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Financial Recovery Services P.O. Box 385908 Minneapolis, MN 55438	-	DATE INCURRED: CONSIDERATION: Unsecured Debt REMARKS:				\$964.64
ACCT #: First National Credit Card P. O. Box 3038 Evansville, IN 47730-3038	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Subtotal >						\$1,338.64
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

Sheet no. 9 of 23 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxxxxx8284 First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107	-	DATE INCURRED: 01/02/2006 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx5915 First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107	-	DATE INCURRED: 09/2011 CONSIDERATION: Credit Card REMARKS:			X	\$863.00
ACCT #: xxxxxxxxxxxx8284 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104	-	DATE INCURRED: 01/02/2006 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx1845 FNCC/Legacy Visa Attn: Bankruptcy PO Box 5097 Sioux Falls, SD 57117	-	DATE INCURRED: 11/2011 CONSIDERATION: Credit Card REMARKS:			X	\$446.00
ACCT #: xxxxxxxx2818 Frost Bank Po Box 1600 San Antonio, TX 78296	-	DATE INCURRED: 07/2010 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxx2818 Frost National Bank P.O. Box 2270 San Antonio, TX 78298	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Subtotal >						\$1,309.00
Total >						

Sheet no. 10 of 23 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxxxxx6097 GECRB/Chevron Attention: Bankruptcy PO Box 103104 Roswell, GA 30076	-	DATE INCURRED: 07/27/2000 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx6097 Gemb/chevron Attention: Bankruptcy PO Box 103104 Roswell, GA 30076	-	DATE INCURRED: 07/27/2000 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxx0882 Gm Financial Po Box 181145 Arlington, TX 76096	-	DATE INCURRED: 03/2002 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Greater Houston 2411 Fountainview Houston, TX 77057	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Greater Houston Medical PO Box 200535 Houston, Tx 77216	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Gulf Coast Pathology PO Box 947 Houston, Tx 77001	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>11</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$0.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: Gulf Coast Pathology Associates P. O. Box 947 Houston, TX 77001-0947	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Hine Tran PO Box 200211 Houston, Tx 77216	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: 6935 Houst Finc 405 Main St., Ste. 520 Houston, TX 77002	-	DATE INCURRED: 10/06/2010 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: x5969 Houst Finc Houston Finance 405 Main Street Suite B-101 Houston, TX 77002	-	DATE INCURRED: 01/05/2011 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxx0702 Hsbc Bank Po Box 5253 Carol Stream, IL 60197	-	DATE INCURRED: 02/2000 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxx5293 Hsbc Bank ATTN: BANKRUPTCY PO BOX 5253 Carol Stream, IL 60197	-	DATE INCURRED: 09/2004 CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>12</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$0.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxxxxx7601 Hsbc Bank ATTN: BANKRUPTCY PO BOX 5213 Carol Stream, IL 60197	-	DATE INCURRED: 12/2007 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx3669 Hsbc Cc Po Box 3425 Buffalo, NY 14240	-	DATE INCURRED: 11/2007 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx2696 Hsbc Nv Po Box 5253 Carol Stream, IL 60197	-	DATE INCURRED: 01/2000 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxx5182 Hsbc/rs Attn: Bankruptcy PO Box 5263 Carol Stream, IL 60197	-	DATE INCURRED: 09/1999 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: I Siddiqui 2323 South Voss Rd Houston, Tx 713-589-2732	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: IBC Bank 5615 Kirby Drive Houston, TX 77005	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>13</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$0.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxx4001 IC System Attn: Bankruptcy 444 Highway 96 East; PO Box 64378 St. Paul, MN 55164	-	DATE INCURRED: 04/2014 CONSIDERATION: Collection Attorney REMARKS:			X	\$277.00
ACCT #: xxxx5721 Integrity Advance 300 Creek View Road Suite 102 Newark, DE 19711	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: James B. Inghish 12618 Barryknoll Lane Houston, Texas 77024	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Jefferson Capital 16 McLeland Cloud, MN 56303	-	DATE INCURRED: CONSIDERATION: Credit Card REMARKS:			X	\$863.63
ACCT #: Laboratory Corp. of America PO Box 2210 Burlington, NC 27216	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Loan Depot 724 East Villa Maria Suite 700 Bryan, TX 77802	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Subtotal >						\$1,140.63
Total >						

Sheet no. 14 of 23 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: x0745 Loan Star Fi 1224 S Shaver Pasadena, TX 77503	-	DATE INCURRED: 10/04/2010 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: x7419 Loan Star Fi 1224 S Shaver Pasadena, TX 77503	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: x0745 Loan Star Fi 1224 S Shaver Pasadena, TX 77503	-	DATE INCURRED: 10/04/2010 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: LTD Financial Service 7322 Southwest Frwy. Ste. 1600 Houston, TX 77074	-	DATE INCURRED: 2012 CONSIDERATION: Credit Card REMARKS:			X	\$446.89
ACCT #: xxxxxxxxxxxx8464 Lynv Funding Llc 625 Pilot Road Suite 2/3 Las Vegas, NV 89119	-	DATE INCURRED: 01/2013 CONSIDERATION: Factoring Company Account REMARKS:			X	\$965.00
ACCT #: M Mchaffey PO Box 4590 Houston, Tx 77210	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>15</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$1,411.89
<div style="text-align: right;">Total ></div> <div style="text-align: center;">(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)</div>						

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: Mangini Lakhia PO Box 421756 Houston, Tx 77242	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxx6957 Max Lend P.O. Box 639 Parshall, ND 58770	-	DATE INCURRED: 4/2015 CONSIDERATION: Payday Loan REMARKS:			X	\$872.11
ACCT #: xxxx0483 Mazda Amer Cr PO Box 537901 Livonia, MI 48153	-	DATE INCURRED: 08/1999 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx7252 Merrick Bk Attn: Bankruptcy P.O. Box 9201 Old Bethpage, NY 11804	-	DATE INCURRED: 12/2011 CONSIDERATION: Credit Card REMARKS:			X	\$934.00
ACCT #: xxxxxxxxxxxxxxxx0326 Navient Po Box 9500 Wilkes Barre, PA 18773	-	DATE INCURRED: 12/1995 CONSIDERATION: Educational REMARKS:				\$1,588.00
ACCT #: xxx0681 Network Coll 9898 Bissonnet Houston, TX 77036	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>16</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal >
						\$3,394.11
						Total >
						(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxx4082 Northern Plains Funding LLC P.O. Box 516 Hays, MT 59527	-	DATE INCURRED: CONSIDERATION: Payday Loan REMARKS:			X	\$910.00
ACCT #: xxxxxxxxxxxx0006 PLS Loan Store 8900 Westheimer Houston, Texas 70763	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Premier Bank Card P.O. Box 129 Thorofare, NJ 08086	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx3243 Providian Attn: Bankruptcy PO Box 15298 Wilmington, DE 19850	-	DATE INCURRED: 07/2001 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx3243 Providian/Chase Attn: Bankruptcy PO Box 15298 Wilmington, DE 19850	-	DATE INCURRED: 07/2001 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: R DAS PO Box 4850 Houston, Tx 77210	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>17</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal >
						\$910.00
						Total >
						(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxx0378 Receivables Performanc 20816 44th Ave W Lynnwood, WA 98036	-	DATE INCURRED: 07/2014 CONSIDERATION: Collection Attorney REMARKS:			X	\$679.00
ACCT #: S Ahmed 2323 South Voss Rd Houston, Tx 713-589-2732	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: S Smirnakis PO Box 4850 Houston, Tx 77210	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: S. Zaidi PO Box 16854 Sugarland, Tx 77496	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Sam Houston Race Park 7575 North Sam Houston Parkway West Houston, TX 77064	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxx4880 Sears/cbsd Po Box 6189 Sioux Falls, SD 57117	-	DATE INCURRED: 06/1978 CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>18</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal >
						\$679.00
						Total >
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxx8292 Shell Oil / Citibank Attn.: Centralized Bankruptcy PO Box 20507 Kansas City, MO 64195	-	DATE INCURRED: 04/2000 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Singleton Associates PO Box 4346 Houston, Tx 77210	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Singleton Associates Medical 12951 South Freeway Houston, Tx 77047	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Speedy Cash 715 W. Abram Street Arlington, Texas 76013	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: St. Luke Episcopal Hospital P.O. Box 20805 Houston, Texas 77225	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxx5000 Stellar Recovery Inc 1327 Highway 2 Wes Kalispell, MT 59901	-	DATE INCURRED: 12/2014 CONSIDERATION: Collection Attorney REMARKS:			X	\$453.00
Sheet no. <u>19</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal >
						\$453.00
						Total >
						(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: Sugar Land Medical PO Box 481 Alief,Tx 77411	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: 6396 Sun Loan Company 1955 Gessner Dr Houston, TX 77080	-	DATE INCURRED: 12/2010 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: 3639 Sun Loan Company 1955 Gessner Dr Houston, TX 77080	-	DATE INCURRED: 12/27/2010 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: T Mobile P.O. Box 790047 Saint Louis, MO 63179-0047	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxx8858 Tam/spearsdh 4115 Medical Drive San Antonio, TX 78229	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx7285 Wash Mutual/Providian Attn: Bankruptcy Dept PO Box 15298 Wilmington, DE 19850	-	DATE INCURRED: 11/2001 CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>20</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$0.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT UNLIQUIDATED DISPUTED			AMOUNT OF CLAIM
ACCT #: West Houston Medical Hospital PO Box 406325 Atlanta, Georgia 30384	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: West Medical Medical Hospital 12141 Richmond Ave Houston, Texas 77082	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxxx9622 Wf Fin Bank Wells Fargo Financial 4137 121st St Urbendale, IA 50323	-	DATE INCURRED: 11/2007 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxxx9622 Wf Fin Bank Attention: Bankruptcy PO Box 10438 Des Moines, IA 50306	-	DATE INCURRED: 11/27/2007 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxxx0001 Wf PII Po Box 3117 Winston Salem, NC 27102	-	DATE INCURRED: 04/15/2008 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxxx0001 Wff Auto Po Box 29704 Phoenix, AZ 85038	-	DATE INCURRED: 04/2008 CONSIDERATION: Notice Only REMARKS:				Notice Only

Sheet no. 21 of 23 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal > **\$0.00**

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxxxx3786 Wffinance 800 Walnut St Des Moines, IA 50309	-	DATE INCURRED: 04/2008 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxx3786 Wffinancial Mac 4031-080 Des Moines, IA 50309	-	DATE INCURRED: 04/2008 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxx5001 World Finance Corp 1923 Gessner Dr Houston, TX 77080	-	DATE INCURRED: 08/2007 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxx8801 World Finance Corp 1923 Gessner Dr Houston, TX 77080	-	DATE INCURRED: 05/2007 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxx3701 World Finance Corp 1923 Gessner Dr Houston, TX 77080	-	DATE INCURRED: 12/2007 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxx0601 World Finance Corp 1923 Gessner Dr Houston, TX 77080	-	DATE INCURRED: 03/2006 CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>22</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$0.00
<div style="text-align: right;">Total ></div> <div style="text-align: center;">(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)</div>						

B6F (Official Form 6F) (12/07) - Cont.

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxx6901 World Finance Corp 1923 Gessner Dr Houston, TX 77080	-	DATE INCURRED: 12/2005 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: 3037 World Finance Corp 1923 Gessner Dr Houston, TX 77080	-	DATE INCURRED: 11/26/2010 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xx98-20 Worth Financ 11671 Jollyville R Austin, TX 78759	-	DATE INCURRED: 11/07/2005 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: 7098 Worth Financ 11671 Jollyville R Austin, TX 78759	-	DATE INCURRED: 11/07/2005 CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: Y Birnbaum PO Box 4803 Houston, Tx 77210	-	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
Sheet no. <u>23</u> of <u>23</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$0.00
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						Total > \$16,861.27

B6G (Official Form 6G) (12/07)

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases of contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

B6H (Official Form 6H) (12/07)

In re **Kenneth Paxton**Case No. _____
(if known)**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Fill in this information to identify your case:

Debtor 1	Kenneth		Paxton
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS			
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status**Occupation****Employer's name****Employer's address****Debtor 1**

- ☒ Employed
☐ Not employed

Staff Accountant**Conklin Hruzek & Co.****801 Travis, Suite 2050**

Number Street

Houston

City

TX 77002

State Zip Code

Debtor 2 or non-filing spouse

- ☐ Employed
☐ Not employed

Number Street

City

State Zip Code

How long employed there? **2 years 6 months****Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$5,100.01	
3. Estimate and list monthly overtime pay.	+ \$0.00	
4. Calculate gross income. Add line 2 + line 3.	\$5,100.01	

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
 First Name Middle Name Last Name

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here →	4.	\$5,100.01	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$1,183.39	
5b. Mandatory contributions for retirement plans	5b.	\$0.00	
5c. Voluntary contributions for retirement plans	5c.	\$0.00	
5d. Required repayments of retirement fund loans	5d.	\$0.00	
5e. Insurance	5e.	\$74.23	
5f. Domestic support obligations	5f.	\$0.00	
5g. Union dues	5g.	\$0.00	
5h. Other deductions. Specify: _____	5h. +	\$0.00	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$1,257.62	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,842.39	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	
8b. Interest and dividends	8b.	\$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	
8d. Unemployment compensation	8d.	\$0.00	
8e. Social Security	8e.	\$0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00	
8g. Pension or retirement income	8g.	\$853.31	
8h. Other monthly income. Specify: _____	8h. +	\$0.00	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$853.31	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$4,695.70 +	\$4,695.70
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11.	+	\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies.	12.		\$4,695.70 Combined monthly income

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
First Name Middle Name Last Name

13. Do you expect an increase or decrease within the year after you file this form?

☐ No.

☒ Yes. Explain:

Debtor anticipates adjusting his with holdings to eliminate tax liability.

Fill in this information to identify your case:

Debtor 1	Kenneth		Paxton
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF TEXAS		
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date: _____
MM / DD / YYYY
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household**1. Is this a joint case?**

- ☒ No. Go to line 2.
- ☐ Yes. **Does Debtor 2 live in a separate household?**
- ☐ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☒ No
- ☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
_____	_____	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 6I.)

Your expenses**4. The rental or home ownership expenses for your residence.**

Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4.	_____
4a.	_____
4b.	\$117.00
4c.	\$50.00
4d.	_____

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
 First Name Middle Name Last Name

Your expenses

5. Additional mortgage payments for your residence, such as home equity loans	5.	_____
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	<u>\$125.00</u>
6b. Water, sewer, garbage collection	6b.	_____
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$55.00</u>
6d. Other. Specify: <u>Cablevision</u>	6d.	<u>\$80.00</u>
7. Food and housekeeping supplies	7.	<u>\$560.00</u>
8. Childcare and children's education costs	8.	_____
9. Clothing, laundry, and dry cleaning	9.	<u>\$265.00</u>
10. Personal care products and services	10.	<u>\$90.00</u>
11. Medical and dental expenses	11.	<u>\$140.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<u>\$250.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	<u>\$200.00</u>
14. Charitable contributions and religious donations	14.	<u>\$200.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	_____
15b. Health insurance	15b.	_____
15c. Vehicle insurance	15c.	<u>\$141.00</u>
15d. Other insurance. Specify: _____	15d.	_____
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>Property taxes</u>	16.	<u>\$225.00</u>
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	_____
17b. Car payments for Vehicle 2	17b.	_____
17c. Other. Specify: _____	17c.	_____
17d. Other. Specify: _____	17d.	_____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18.	_____
19. Other payments you make to support others who do not live with you. Specify: _____	19.	_____

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
 First Name Middle Name Last Name

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. _____
20b. Real estate taxes	20b. _____
20c. Property, homeowner's, or renter's insurance	20c. _____
20d. Maintenance, repair, and upkeep expenses	20d. _____
20e. Homeowner's association or condominium dues	20e. _____

21. Other. Specify: **See continuation sheet** 21. + **\$305.00**

22. Your monthly expenses. Add lines 4 through 21.
 The result is your monthly expenses. 22. **\$2,803.00**

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$4,695.70
23b. Copy your monthly expenses from line 22 above.	23b. - \$2,803.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$1,892.70

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

None.

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
First Name Middle Name Last Name

21. Other. Specify:

Work Lunches	\$160.00
Haircuts and Related Expenses	\$30.00
Emergency Savings Fund - \$25.00	
Gym/Health Club Dues	\$65.00
Internet	\$50.00

Total: \$305.00

B 6 Summary (Official Form 6 - Summary) (12/14)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re **Kenneth Paxton**

Case No.

Chapter **13**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER	
A - Real Property	Yes	1	\$140,660.00			
B - Personal Property	Yes	5	\$14,113.34			
C - Property Claimed as Exempt	Yes	2				
D - Creditors Holding Secured Claims	Yes	2			\$109,524.59	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3			\$12,579.86	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	24			\$16,861.27	
G - Executory Contracts and Unexpired Leases	Yes	1				
H - Codebtors	Yes	1				
I - Current Income of Individual Debtor(s)	Yes	3				\$4,695.70
J - Current Expenditures of Individual Debtor(s)	Yes	4				\$2,803.00
TOTAL		46	\$154,773.34	\$138,965.72		

B 6 Summary (Official Form 6 - Summary) (12/14)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re **Kenneth Paxton**

Case No.

Chapter **13**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$8,654.86
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$1,770.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$10,424.86

State the following:

Average Income (from Schedule I, Line 12)	\$4,695.70
Average Expenses (from Schedule J, Line 22)	\$2,803.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	\$5,953.32

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$7,098.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$12,579.86	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$16,861.27
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$23,959.27

B6 Declaration (Official Form 6 - Declaration) (12/07)

In re **Kenneth Paxton**

Case No. _____
(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ **48** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **6/18/2015**

Signature **/s/ Kenneth Paxton**
Kenneth Paxton

Date _____

Signature _____

[If joint case, both spouses must sign.]

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re: **Kenneth Paxton**Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the TWO YEARS immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$25,892.35	2015 Employment Income
\$61,200.00	2014 Employment Income
\$47,407.00	2013 Employment Income (Debtor)

2. Income other than from employment or operation of business

None ☐ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the TWO YEARS immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$0.00	2015 Gambling Winnings
\$629.00	2014 Gambling Winnings
\$643.00	2013 Gambling Winnings (Debtor)
\$206.65	2015 Income from Pension
\$494.00	2014 Income from Pension
\$494.00	2013 Income from Pension (Debtor)
\$4,059.90	2015 Income from Retirement
\$9,743.76	2014 Income from Retirement
\$9,295.00	2013 Income from Retirement (Debtor)
\$0.00	2015 Survivors Claim-Class Action Lawsuit
\$2,000.00	2014 Survivors Claim-Class Action Lawsuit
\$0.00	2013 Survivors Claim-Class Action Lawsuit (Debtor)

3. Payments to creditors*Complete a. or b., as appropriate, and c.*

None ☐ a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 DAYS immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Gm Financial Po Box 181145 Arlington, TX 76096	Monthly (Last 90 Days)	\$480.00	\$17,248.00

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re: **Kenneth Paxton**Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 1

**Creative Management
8323 Southwest Freeway
Suite 330
Houston, TX 77074**

4/2015**\$290.00****\$17,340.00**

None



b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 DAYS immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None



c. All debtors: List all payments made within ONE YEAR immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within ONE YEAR immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

None



a. Describe any assignment of property for the benefit of creditors made within 120 DAYS immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None



b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None



List all gifts or charitable contributions made within ONE YEAR immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re: **Kenneth Paxton**Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 2

8. Losses

None ☐ List all losses from fire, theft, other casualty or gambling within ONE YEAR immediately preceding the commencement of this case OR SINCE THE COMMENCEMENT OF THIS CASE. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
Sam Houston Race Park 7575 North Sam Houston Pkwy W Houston, Texas 77064 Cash Value \$200.00	Gamling Losses	3/2015

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within ONE YEAR immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Debt Helper.Com Credit Card Management Services, Inc. 4611 Okeechobee Blvd., Suite 114 West Palm Beach, FL 33417	6/12/2015	\$24.00 Credit Conseling
Baker & Associates 5151 Katy Freeway Suite 200 Houston, TX 77007-2251	6/4/2015	\$750.00 Legal Fees

10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within TWO YEARS immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property transferred by the debtor within TEN YEARS immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re: **Kenneth Paxton**Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 3

11. Closed financial accounts

None



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within ONE YEAR immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
BBVA Compass Bank P.O. Box 10566 Birmingham, Alabama 35296	Checking Account xxxx7063 Final Balance \$0.00	6/2015
Wells Fargo Bank PO Box 29487 Phoenix, AZ 85038-9487	Checking Account xxxx6379 Final Balance \$0.00	6/2015
Wells Fargo Bank PO Box 29487 Phoenix, AZ 85038-9487	Checking Account xxxx6346 Final Balance \$0.00	4/2014
Wells Fargo Bank PO Box 29487 Phoenix, AZ 85038-9487	Savings Account xxxx8477 Final Balance \$0.00	9/2014
BBVA Compass Bank P.O. Box 10566 Birmingham, Alabama 35296	Savings Account xxxx3115 Final Balance \$0.00	09/2014

12. Safe deposit boxes

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
Frost Bank 10380 Longmont Houston, Texas 77042 Box # 444	Kenneth Paxton 10380 Longmont Dr. Houston, Texas 77042	Legal Documents (pension, mortgage documents and related materials)	Current

13. Setoffs

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 DAYS preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None



List all property owned by another person that the debtor holds or controls.

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re: **Kenneth Paxton**Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 4

15. Prior address of debtor

None



If the debtor has moved within THREE YEARS immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within EIGHT YEARS immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

- None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:



- None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.



- None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

None



a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within SIX YEARS immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within SIX YEARS immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within SIX YEARS immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within SIX YEARS immediately preceding the commencement of this case.

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re: **Kenneth Paxton**

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS
Continuation Sheet No. 5

None



b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re: **Kenneth Paxton**

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 6

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 6/18/2015

Signature /s/ Kenneth Paxton
of Debtor Kenneth Paxton

Date _____

Signature _____
of Joint Debtor
(if any)

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both.
18 U.S.C. §§ 152 and 3571*

B 201B (Form 201B) (12/09)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

In re **Kenneth Paxton**

Case No. _____

Chapter 13

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

<u>Kenneth Paxton</u> Printed Name(s) of Debtor(s) Case No. (if known) _____	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> X <u>/s/ Kenneth Paxton</u> Signature of Debtor </td> <td style="width: 50%; vertical-align: top;"> <u>6/18/2015</u> Date </td> </tr> <tr> <td colspan="2"> X _____ Signature of Joint Debtor (if any) </td> </tr> </table>	X <u>/s/ Kenneth Paxton</u> Signature of Debtor	<u>6/18/2015</u> Date	X _____ Signature of Joint Debtor (if any)	
X <u>/s/ Kenneth Paxton</u> Signature of Debtor	<u>6/18/2015</u> Date				
X _____ Signature of Joint Debtor (if any)					

Certificate of Compliance with § 342(b) of the Bankruptcy Code

I, **Patrick J. Gilpin, Jr.**, counsel for Debtor(s), hereby certify that I delivered to the Debtor(s) the Notice required by § 342(b) of the Bankruptcy Code.

/s/ Patrick J. Gilpin, Jr.

Patrick J. Gilpin, Jr., Attorney for Debtor(s)
 Bar No.: 24044739
 Baker & Associates
 5151 Katy Freeway
 Suite 200
 Houston, TX 77007-2251
 Phone: (713) 869-9200
 Fax: (713) 869-9100
 E-Mail: patrick.gilpin@bakerassociates.net

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) ONLY if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a JOINT CASE (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days BEFORE the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income
(\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1167 filing fee, \$550 administrative fee: Total fee \$1717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

IN RE: **Kenneth Paxton**

CASE NO

CHAPTER **13**

COVERSHEET FOR LIST OF CREDITORS

I hereby certify under penalty of perjury that the attached List of Creditors, which consists of _____ page(s), is true, correct and complete to the best of my knowledge.

Date 6/18/2015

Signature /s/ Kenneth Paxton
Kenneth Paxton

Date _____

Signature _____

A Parhizqar
2323 South Voss Rd
Houston, Tx 713-589-2732

Ace Cash Express
1231 Green Way Drive
Irving, TX 75038

ACS
P. O. Box 730
Aberdeen, SD 57402

Acs/gco Ed Loan Fund
501 Bleecker St
Utica, NY 13501

Acs/gco Ed Loan Fund
C/o Acs
Utica, NY 13501

Allied Cash Advance
7613 Westheimer Rd
Houston, Texas 77063

American Express
c/o Becket and Lee LLP
PO Box 3001
Malvern, PA 19355

American Express
PO Box 3001
16 General Warren Blvd
Malvern, PA 19355

American Honda Finance
3625 W Royal Lane
Irving, TX 75063

American Honda Finance
3625 W Royal Ln Ste 100
Irving, TX 75063

Americredit
Po Box 181145
Arlington, TX 76096

Amex
c/o Beckett & Lee
PO Box 3001
Malvern, PA 19355

Applied Card Bank
Attention: General Inquiries
PO Box 17125
Wilmington, DE 19850

Applied Card Bank
Attention: Bankruptcy
PO Box 17125
Wilmington, DE 19850

At & T U Verse
P O BOX 5014
Carol Stream, IL 60197-5014

Atlas Credit
119 E. 5th Street
Austin, TX 78701

B&f Finance
7012 Woodridge
Houston, TX 77087

B&f Finance
B&F Finance
PO Box 850, Attn: Bankruptcy
Lake Dallas, TX 75065

Baker & Associates
5151 Katy Freeway, Suite 200
Houston, TX 77007

Baker & Associates - EFT Order
5151 Katy Freeway, Suite 200
Houston, TX 77007

Bayou City EMS Group
PO Box 451960
Houston, TX 77245

Bayou City EMS Group Medical
7979 Almeda Rd.
Houston, Tx 77054

Bright Star Cash
P.O. Box 502
Lac du Flambeau, WI 54538

Cap One
Po Box 5253
Carol Stream, IL 60197

Capital One
Attn: Bankruptcy
PO Box 30285
Salt Lake City, UT 84130

Capital One, N.a.
Bankruptcy Dept
PO Box 5155
Norcross, GA 30091

Cardiovascular Care
PO Box 1599
Houston, Tx 77251

Carson Lo
PO Box 19814
Houston, Tx 77224

Cash Central
84 E. 2400 N.
North Logan, UT 84341

Cash Store
12350 Westheimer
Suite B
Houston, Texas 77077

CashNet USA
175 W. Jackson Blvd. Suite #1000
Chicago, IL 60604

Cbna
Po Box 6189
Sioux Falls, SD 57117

Chase
Attn: Bankruptcy Dept
PO Box 15298
Wilmington, DE 19850

Chase
P.o. Box 15298
Wilmington, DE 19850

Chase Card
Po Box 15298
Wilmington, DE 19850

Chase Manhattan Bank
Po Box 2558
Houston, TX 77252

Check N Go
7755 Montgomery Road, Suite 400
Cincinnati, OH 45236

Chevron / Texaco Citibank
Attn: Centralized Bankruptcy
PO Box 20507
Kansas City, MO 64195

Comcast
P.O. Box 660618
Dallas, Texas 75266-0618

Courtesy Credit Co
7006 Woodridge
Houston, Texas 77087

Creative Management
8323 Southwest Freeway
Suite 330
Houston, TX 77074

Credit One Bank
P.O. Box 60508
City of Industry, CA 91716-0500

Credit Services Organization
201 Keith Street, Suite 80
Cleveland, TN 37311

Dell Financial Services
Attn: Bankruptcy Dept.
PO Box 81577
Austin, TX 78708

Dell Financial Services
Dell Financial Services Attn: Bankruptcy
PO Box 81577
Austin, TX 78708

Delta Fin/ryl Mgt
25331 1h 10 West
San Antonio, TX 78257

Deltafin
25331 1h 10 West
San Antonio, TX 78257

Denovus
480 Johnson Road, Suite 110
Washington, PA 15301

DSRM National Bank/Diamond Shamrock
PO Box 300
Amarillo, TX 79105

Eseroghene Otah
17510 West Grand Parkway South, Ste. 590
Sugarland, Tx 77479

Financial Recovery Services
P.O. Box 385908
Minneapolis, MN 55438

First National Credit Card
P. O. Box 3038
Evansville, IN 47730-3038

First Premier Bank
3820 N Louise Ave
Sioux Falls, SD 57107

First Premier Bank
601 S Minnesota Ave
Sioux Falls, SD 57104

FNCC/Legacy Visa
Attn: Bankruptcy
PO Box 5097
Sioux Falls, SD 57117

Frost Bank
Po Box 1600
San Antonio, TX 78296

Frost National Bank
P.O. Box 2270
San Antonio, TX 78298

GEGRB/Chevron
Attention: Bankruptcy
PO Box 103104
Roswell, GA 30076

Gemb/chevron
Attention: Bankruptcy
PO Box 103104
Roswell, GA 30076

Gm Financial
Po Box 181145
Arlington, TX 76096

Greater Houston
2411 Fountainview
Houston, TX 77057

Greater Houston Medical
PO Box 200535
Houston, Tx 77216

Gulf Coast Pathology
PO Box 947
Houston, Tx 77001

Gulf Coast Pathology Associates
P. O. Box 947
Houston, TX 77001-0947

Hine Tran
PO Box 200211
Houston, Tx 77216

Houst Finc
405 Main St., Ste. 520
Houston, TX 77002

Houst Finc
Houston Finance
405 Main Street Suite B-101
Houston, TX 77002

Hsbc Bank
Po Box 5253
Carol Stream, IL 60197

Hsbc Bank
ATTN: BANKRUPTCY
PO BOX 5253
Carol Stream, IL 60197

Hsbc Bank
ATTN: BANKRUPTCY
PO BOX 5213
Carol Stream, IL 60197

Hsbc Cc
Po Box 3425
Buffalo, NY 14240

Hsbc Nv
Po Box 5253
Carol Stream, IL 60197

Hsbc/rs
Attn: Bankruptcy
PO Box 5263
Carol Stream, IL 60197

I Siddiqui
2323 South Voss Rd
Houston, Tx 713-589-2732

IBC Bank
5615 Kirby Drive
Houston, TX 77005

IC System
Attn: Bankruptcy
444 Highway 96 East; PO Box 64378
St. Paul, MN 55164

Integrity Advance
300 Creek View Road
Suite 102
Newark, DE 19711

Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101-7346

Internal Revenue Service
Mail Stop 5024 HOU
1919 Smith
Houston, TX 77002

Internal Revenue Service-2011-2014 Taxes
Insolvency Section
1919 Smith St Stop 5022 HOU
Houston, TX 77002

James B. English
12618 Barryknoll Lane
Houston, Texas 77024

Jefferson Capital
16 McLeland
Cloud, MN 56303

Laboratory Corp. of America
PO Box 2210
Burlington, NC 27216

Loan Depot
724 East Villa Maria
Suite 700
Bryan, TX 77802

Loan Star Fi
1224 S Shaver
Pasadena, TX 77503

LTD Financial Service
7322 Southwest Frwy. Ste. 1600
Houston, TX 77074

Lvnv Funding Llc
625 Pilot Road Suite 2/3
Las Vegas, NV 89119

M Mchaffey
PO Box 4590
Houston, Tx 77210

Mangini Lakhia
PO Box 421756
Houston, Tx 77242

Max Lend
P.O. Box 639
Parshall, ND 58770

Mazda Amer Cr
PO Box 537901
Livonia, MI 48153

Merrick Bk
Attn: Bankruptcy
P.O. Box 9201
Old Bethpage, NY 11804

Navient
Po Box 9500
Wilkes Barre, PA 18773

Network Coll
9898 Bissonnet
Houston, TX 77036

Northern Plains Funding LLC
P.O. Box 516
Hays, MT 59527

PLS Loan Store
8900 Westheimer
Houston, Texas 70763

Premier Bank Card
P.O. Box 129
Thorofare, NJ 08086

Propel Financial Services, LLC
P.O. Box 844319
Dallas, TX 75284

Providian
Attn: Bankruptcy
PO Box 15298
Wilmington, DE 19850

Providian/Chase
Attn: Bankruptcy
PO Box 15298
Wilmington, DE 19850

R DAS
PO Box 4850
Houston, Tx 77210

Receivables Performanc
20816 44th Ave W
Lynnwood, WA 98036

S Ahmed
2323 South Voss Rd
Houston, Tx 713-589-2732

S Smirnakis
PO Box 4850
Houston, Tx 77210

S. Zaidi
PO Box 16854
Sugarland, Tx 77496

Sam Houston Race Park
7575 North Sam Houston Parkway West
Houston, TX 77064

Sears/cbsd
Po Box 6189
Sioux Falls, SD 57117

Shell Oil / Citibank
Attn.: Centralized Bankruptcy
PO Box 20507
Kansas City, MO 64195

Singleton Associates
PO Box 4346
Houston, Tx 77210

Singleton Associates Medical
12951 South Freeway
Houston,Tx 77047

Speedy Cash
715 W. Abram Street
Arlington, Texas 76013

St. Luke Episcopal Hospital
P.O. Box 20805
Houston, Texas 77225

Stellar Recovery Inc
1327 Highway 2 Wes
Kalispell, MT 59901

Sugar Land Medical
PO Box 481
Alief,Tx 77411

Sun Loan Company
1955 Gessner Dr
Houston, TX 77080

T Mobile
P.O. Box 790047
Saint Louis, MO 63179-0047

Tam/spearsdh
4115 Medical Drive
San Antonio, TX 78229

United States Trustee
515 Rusk Street
Houston, TX 77002

Wash Mutual/Providian
Attn: Bankruptcy Dept
PO Box 15298
Wilmington, DE 19850

Wells Fargo
P.O. Box 5169
Sioux Falls, SD 57117

West Houston Medical Hospital
PO Box 406325
Atlanta, Georgia 30384

West Medical Medical Hospital
12141 Richmond Ave
Houston, Texas 77082

Wf Fin Bank
Wells Fargo Financial
4137 121st St
Urbendale, IA 50323

Wf Fin Bank
Attention: Bankruptcy
PO Box 10438
Des Moines, IA 50306

Wf Pl1
Po Box 3117
Winston Salem, NC 27102

Wff Auto
Po Box 29704
Phoenix, AZ 85038

Wffinance
800 Walnut St
Des Moines, IA 50309

Wffinancial
Mac 4031-080
Des Moines, IA 50309

World Finance Corp
1923 Gessner Dr
Houston, TX 77080

Worth Financ
11671 Jollyville R
Austin, TX 78759

Y Birnbaum
PO Box 4803
Houston, Tx 77210

Fill in this information to identify your case:

Debtor 1 **Kenneth** **Paxton**
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**

Case number
 (if known) _____

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

- ☐ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- ☒ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- ☐ 3. The commitment period is 3 years.
- ☒ 4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 22C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income**1. What is your marital and filing status?** Check one only.

- ☒ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married.** Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$5,100.01	
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00	
5. Net income from operating a business, profession, or farm		
Gross receipts (before all deductions)	\$0.00	
Ordinary and necessary operating expenses	— \$0.00	
Net monthly income from a business, profession, or farm	\$0.00	
	Copy here →	\$0.00
6. Net income from rental and other real property		
Gross receipts (before all deductions)	\$0.00	
Ordinary and necessary operating expenses	— \$0.00	
Net monthly income from rental or other real property	\$0.00	
	Copy here →	\$0.00

Debtor 1 **Kenneth** **Paxton**
 First Name Middle Name Last Name

Case number (if known) _____

7. Interest, dividends, and royalties

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
----------------------	--

\$0.00

8. Unemployment compensation

\$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:↓

For you..... **\$0.00**

For your spouse.....

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

\$853.31

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.

10a. _____

10b. _____

10c. Total amounts from separate pages, if any.

+ +

11. Calculate your total average monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\$5,953.32

+

\$5,953.32

**Total average
monthly income**

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11. **\$5,953.32**

13. Calculate the marital adjustment. Check one:

☒ You are not married. Fill in 0 in line 13d.

☐ You are married and your spouse is filing with you. Fill in 0 in line 13d.

☐ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

In lines 13a-c, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 on line 13d.

13a. _____

13b. _____

13c. _____

+

13d. Total..... **\$0.00** Copy here..... 13d. - **\$0.00**

14. Your current monthly income. Subtract line 13d from line 12.

14. **\$5,953.32**

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here → 15a. **\$5,953.32**

Multiply line 15a by 12 (the number of months in a year).

X 12

15b. The result is your current monthly income for the year for this part of the form.

15b. **\$71,439.84**

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
 First Name Middle Name Last Name

16. Calculate the median family income that applies to you. Follow these steps:

- 16a. Fill in the state in which you live. Texas
- 16b. Fill in the number of people in your household. 1
- 16c. Fill in the median family income for your state and size of household..... 16c. **\$42,908.00**
 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

- 17a. ☐ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out Calculation of Disposable Income (Official Form 22C-2).
- 17b. ☒ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Disposable Income (Official Form 22C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. Copy your total average monthly income from line 11. 18. **\$5,953.32**

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13d.

If the marital adjustment does not apply, fill in 0 on line 19a. 19a. — **\$0.00**

Subtract line 19a from line 18. 19b. **\$5,953.32**

20. Calculate your current monthly income for the year. Follow these steps:

- 20a. Copy line 19b 20a. **\$5,953.32**
 Multiply by 12 (the number of months in a year). **X 12**
- 20b. The result is your current monthly income for the year for this part of the form. 20b. **\$71,439.84**
- 20c. Copy the median family income for your state and size of household from line 16c. 20c. **\$42,908.00**

21. How do the lines compare?

- ☐ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- ☒ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Kenneth Paxton
Kenneth Paxton

X _____
 Signature of Debtor 2

Date 6/18/2015
 MM / DD / YYYY

Date _____
 MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 22C-2.

If you checked 17b, fill out Form 22C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify your case:

Debtor 1	Kenneth		Paxton
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS			
Case number (if known)			

☐ Check if this is an amended filing**Official Form 22C-2****Chapter 13 Calculation of Your Disposable Income****12/14**

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 22C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 22C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 22C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. **\$585.00**

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person **\$60.00**

7b. Number of people who are under 65 X **1**

7c. **Subtotal.** Multiply line 7a by line 7b.

\$60.00Copy line 7c
here →**\$60.00****People who are 65 years of age or older**

7d. Out-of-pocket health care allowance per person **\$144.00**

7e. Number of people who are 65 or older X

7f. **Subtotal.** Multiply line 7d by line 7e.

\$0.00Copy line 7f
here →+ **\$0.00**

7g. **Total.** Add lines 7c and 7f.....

\$60.00Copy total
here → 7g.**\$60.00**

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
 First Name Middle Name Last Name

Local Standards

You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities -- Insurance and operating expenses
- Housing and utilities -- Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities -- Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$473.00

9. **Housing and utilities -- Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$1,020.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment
<u>Wells Fargo</u>	<u>\$521.16</u>
_____	_____
_____	_____
	+

9b. Total average monthly payment

\$521.16

Copy line 9b here →

— \$521.16

Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

\$498.84

Copy line 9c here →

\$498.84

10. **If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.** _____

Explain why: _____

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

- ☐ 0. Go to line 14.
☒ 1. Go to line 12.
☐ 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. \$312.00

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
 First Name Middle Name Last Name

- 13. Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 Describe Vehicle 1: **2012 Toyota Corolla L**

13a. Ownership or leasing costs using IRS Local Standard 13a. \$517.00

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment		
<u>Gm Financial</u>	<u>\$287.47</u>	Copy 13b here → -	<u>\$287.47</u>

Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense.
 Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0.

13c. \$229.53 Copy net Vehicle 1 expense here → \$229.53

Vehicle 2 Describe Vehicle 2:

13d. Ownership or leasing costs using IRS Local Standard 13d. _____

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment		
_____	_____	Copy here → -	_____

Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense.
 Subtract line 13e from 13d. If this amount is less than \$0, enter \$0.

13f. \$0.00 Copy net Vehicle 2 expense here → \$0.00

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation. \$0.00

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation. \$0.00

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
 First Name Middle Name Last Name

Other Necessary Expenses

In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

- 16. Taxes:** The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. \$1,184.51
- 17. Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. \$0.00
 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.
- 18. Life insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. \$0.00
 Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.
- 19. Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. \$0.00
 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.
- 20. Education:** The total monthly amount that you pay for education that is either required: \$0.00
 ■ as a condition for your job, or
 ■ for your physically or mentally challenged dependent child if no public education is available for similar services.
- 21. Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. \$0.00
 Do not include payments for any elementary or secondary school education.
- 22. Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. \$90.00
 Payments for health insurance or health savings accounts should be listed only in line 25.
- 23. Optional telephones and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. \$55.00
 Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 22C-1, or any amount you previously deducted.
- 24. Add all of the expenses allowed under the IRS expense allowances.** \$3,487.88
 Add lines 6 through 23.

Additional Expense Deductions

These are additional deductions allowed by the Means Test.

Note: Do not include any expense allowances listed in lines 6-24.

- 25. Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance	<u>\$74.23</u>		
Disability insurance	<u>\$0.00</u>		
Health savings account	<u>\$0.00</u>		
	+		
Total	<u>\$74.23</u>		

Copy total here → \$74.23

Do you actually spend this total amount?

☐ No. How much do you actually spend? _____

☒ Yes

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
 First Name Middle Name Last Name

26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. **\$0.00**

27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential. **\$0.00**

28. Additional home energy costs. Your home energy costs are included in your non-mortgage housing and utilities allowance on line 8. _____

If you believe that you have home energy costs that are more than the home energy costs included in the non-mortgage housing and utilities allowance, then fill in the excess amount of home energy costs.

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$156.25* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. **\$0.00**

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

* Subject to adjustment on 4/01/16, and every 3 years after that for cases begun on or after the date of adjustment.

30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. _____

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4). **\$200.00**

Do not include any amount more than 15% of your gross monthly income.

32. Add all of the additional expense deductions. **\$274.23**
 Add lines 25 through 31.

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
 First Name Middle Name Last Name

Deductions for Debt Payment**33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33g.**

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

	Average monthly payment
Mortgages on your home	
33a. Copy line 9b here.....→	<u>\$521.16</u>
Loans on your first two vehicles	
33b. Copy line 13b here.....→	<u>\$287.47</u>
33c. Copy line 13e here.....→	<u>\$0.00</u>

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?	
33d. <u>Creative Management</u>	<u>Homestead</u>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$289.00</u>
33e. <u>Propel Financial Services, LI</u>	<u>Homestead</u>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<u>\$111.19</u>
33f. _____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes	+ _____

33f. Total average monthly payment. Add lines 33a through 33f..... **\$1,208.82** Copy total here → **\$1,208.82**

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

- ☐ No. Go to line 35.
☒ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount		Monthly cure amount
<u>Wells Fargo</u>	<u>Homestead</u>	<u>\$2,380.76</u>	÷ 60 =	<u>\$39.68</u>
_____	_____	_____	÷ 60 =	_____
_____	_____	_____	÷ 60 =	+ _____
Total				\$39.68 Copy total here → <u>\$39.68</u>

35. Do you owe any priority claims such as a priority tax, child support, or alimony -- that are past due as of the filing date of your bankruptcy case?
11 U.S.C. § 507.

- ☐ No. Go to line 36.
☒ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims..... **\$12,579.86** ÷ 60 = **\$209.67**

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
 First Name Middle Name Last Name

36. Projected monthly Chapter 13 plan payment**\$1,890.00**

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

x **5.95** %

Average monthly administrative expense

\$112.46Copy total
here →**\$112.46****37. Add all of the deductions for debt payment.**

Add lines 33g through 36.

\$1,570.63**Total Deductions from Income****38. Add all of the allowed deductions.**Copy line 24, *All of the expenses allowed under IRS expense allowances*..... **\$3,487.88**Copy line 32, *All of the additional expense deductions*..... **\$274.23**Copy line 37, *All of the deductions for debt payment*..... + **\$1,570.63**

Total deductions

\$5,332.74Copy total
here →**\$5,332.74****Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)****39. Copy your total current monthly income from line 14 of Form 22C-1, Chapter 13****Statement of Your Current Monthly Income and Calculation of Commitment Period.** **\$5,953.32****40. Fill in any reasonably necessary income you receive for support of dependent children.**

The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part 1 of Form 22C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.

41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).

\$0.00**42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A).**

Copy line 38 here..... →

\$5,332.74

Debtor 1 **Kenneth** **Paxton** Case number (if known) _____
 First Name Middle Name Last Name

- 43. Deduction for special circumstances.** If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances	Amount of expense
43a. _____	_____
43b. _____	_____
43c. _____	_____
43d. Total. Add lines 43a through 43c.....	\$0.00

Copy 43d here → + **\$0.00**

44. Total adjustments. Add lines 40 through 43d..... → **\$5,332.74** Copy total here → - **\$5,332.74**

45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.

\$620.58

Part 3: Change in Income or Expenses

- 46. Change in income or expenses.** If the income in Form 22C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 22C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 22C-2				<input type="checkbox"/> Decrease	
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 22C-2				<input type="checkbox"/> Decrease	
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 22C-2				<input type="checkbox"/> Decrease	
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 22C-2				<input type="checkbox"/> Decrease	

Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Kenneth Paxton
Kenneth Paxton

Date 6/18/2015
 MM / DD / YYYY

X _____
 Signature of Debtor 2

Date _____
 MM / DD / YYYY